

INCOME CONTRIBUTION AFFIDAVIT

COMMONWEALTH OF PENNSYLVANIA

COUNTY OF

Lancaster

NAME OF DEBTOR(S)

Norman E. Fawber

CHAPTER 13 CASE#

18-14082

I, Chad Shaub, the person whose name is signed below, hereby swear/affirm that the following are true and correct:

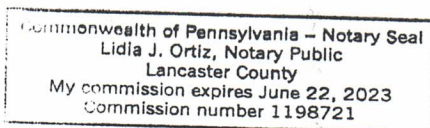
1. The debtor(s) names above is/are my Grandson, specify relationship, for example – mother, father, brother, friend).
2. I contribute financial support in the amount of \$ 500.00 on a monthly basis to the debtor(s).
3. The source of my income is wages (for example, wages from employment, self-employment, disability payments, Social Security, et cetera). The name of my employer is _____ (if applicable).
4. I will continue to make such contributions to the debtor(s) for the entire duration of the Chapter 13 Plan of the debtor(s).

6/26/19
Date

Chad Shaub
Affiant/Contributor (signature)

Chad Shaub
Affiant/Contributor (print name)

Sworn to or affirmed and subscribed to before me by chad m shaub, the Affiant/Contributor identified above, on the 26 day of June, 2019.



[Signature]
Notary Public

(Notary Seal)